**Application or Docket Number** 

Effective October 1, 2001 /0/0533/5												
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THA												
TOTAL CLAIMS			(Column 1)		(Column 2)		1 T	YPE		OR 7		
FOR			150	NUMBER FILED		\$#####################################		RATE	FEE	4	RATE	FEE
			NOMBER FILED		NUMBER EXTRA		ı	BASIC FE	E 370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			1) minus 20=					X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			? minus 3 =					X42=		OR	X84=	
L	ULTIPLE DEPE	NDENT CLAIM F	RESENT				ı	+140=		OR	+280≈	
*1	f the difference	e in column 1 is	less than zero, enter "0" in column 2			L	TOTAL	+	OR	TOTAL		
9	122/01 0			L	10	OTHER	THAN					
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	16	Minus	· 2	$\bigcirc$	=		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	ependent * 3 Minus *** 3 ST PRESENTATION OF MULTIPLE DEPENDENT		CI AINA	-	T	X42=		OR	X84≃		
	TOTAL OF MIDELLINE DEFENDENT CLAIM							+140=		OR	+280≒	
								TOTAL		ÓR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum		(Column 3)	~4	<i>JUII.</i> 1 LC		• '	NODII. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BEA	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	NTATION OF MI	Minus	***	CLAUA	=	卜	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
								TOTAL DIT. FEE		OR ,	TOTAL	
(Column 1) (Column 2) (Column 3)												
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**				X\$ 9=		ОЯ	X\$18=	
	Independent		Minus	***		=	1	X42=		ŀ		
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT	CLAIM		H	.76=		OR	X84=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
	the "Highest Nun the "Highest Nun	nber Previously Pai nber Previously Pai	d For IN THIS id For IN THIS	S SPACE is I	less than	20, enter "20."		TOTAL DIT. FEE			TOTAL DDIT. FEE	
•	THE LIMITEST MAIN!	ber Previously Paid	ror (Total or	Independen	it) is the l	highest number f	lound	in the app	ropriate box	in colu	mn 1.	

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